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HEALTH AND HUMAN RIGHTS: PROGRESS REPORT

Background

1. This report summarizes the progress made in implementation of the conceptual framework on Health and Human Rights (Document CD50/12 and Resolution CD50.R8) (1, 2) adopted by the 50th Directing Council of the Pan American Health Organization (PAHO) in 2010. This report covers the period from August 2017 to March 2023 and is additional to the progress report presented at the 29th Pan American Sanitary Conference in 2017 (3). In the technical cooperation activities of the Pan American Sanitary Bureau (the Bureau) in the various areas of human rights, consideration was given to the exercise of sovereignty by PAHO Member States when signing and ratifying international human rights instruments. In this regard, the work of the Bureau respects the legal context of each of the Member States and is carried out at their express request.

Analysis of Progress Achieved

2. Member States referred to the implementation of international human rights instruments, particularly in the six areas of technical collaboration established in Resolution CD50.R8 (2). Within its financial possibilities, the Bureau was requested to promote technical collaboration and training activities with different actors, as well as the sharing of good practices.

3. Active and continuous work has been carried out with relevant stakeholders, as well as inter-programmatic work with the corresponding technical units and PAHO/WHO representative offices, together with the Member States. In this regard, advice was provided on the implementation of human rights in different aspects of PAHO's programs, projects, and planning of activities. The following progress was made:

- a) Mainstreaming of human rights in PAHO Governing Bodies documents on issues related to the health of groups in situations of vulnerability: access to universal health, healthy life course, maternal mortality, social determinants, noncommunicable diseases, related risk factors, etc. In 2018, the final version of a Bureau report on the health status of lesbian, gay, bisexual, and transgender (LGBT) persons in the Region was approved. The report analyzed the obstacles
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- faced by these persons in accessing health services and offered recommendations to eliminate those obstacles (4).
- b) Submission of reports and technical opinions to international and national bodies; in particular, on the application of human rights norms and standards in health legislation, regulations, and policies.
 - c) Support aimed at strengthening national frameworks and good practices in health and human rights through meetings, documents, publications, comments, and technical opinions on draft legislation, constitutional reforms, public policies, and developments in case law. Among others, the following topics were addressed: good practices in *amparo* actions; access to high-cost medicines and health technologies; the situation of migrants; dignified death and euthanasia; judicialization of the right to health, and promotion of other related rights.
 - d) Collaboration with other international agencies, think tanks, civil society organizations, and relevant actors: review of the UN Framework Policy on Human Trafficking and Forced Labour in Supply Chains; promotion of ratification of the Inter-American Convention on the Human Rights of Older Persons; participation in the draft policy document Guidance on Mental Health, Human Rights and Legislation, of the Office of the United Nations High Commissioner for Human Rights.
4. The COVID-19 pandemic afforded a deeper understanding of how important it is to have a human rights approach when Member States and PAHO address, react, and respond to emergency situations. The pandemic had a major impact on the work of the Bureau: it made it possible to analyze public health measures in relation to human rights standards, particularly given the need to protect groups in situations of vulnerability and those facing the greatest risks. This was achieved by providing opinions, guidance, and ongoing technical support to the Member States that requested it, and to international organizations and other stakeholders regarding technical documents, statements, and positions on human rights and issues around health and COVID-19. The Bureau organized and participated in the following activities, and produced and published the following documents:
- a) Public forums with international experts and regional stakeholders on the relationship between international human rights law and a successful public health response in crisis situations and health emergencies. Multiple specific topics were addressed: rights of children, women, the older people, and migrants; the right to health; and prevention of alcohol consumption, among others.
 - b) Seminars and webinars on the right to health and other rights related to COVID-19 and vaccination, organized by the Inter-American Commission on Human Rights and its Special Rapporteurship on Economic, Social, Cultural and Environmental Rights.
 - c) Activities on the right to health with the judiciaries of Member States, universities in the Region, and WHO Collaborating Centers, such as the O'Neill Institute at Georgetown University School of Law.

- d) Guidance documents, such as *Promoting health equity, gender and ethnic equality, and human rights in COVID 19 responses: Key considerations* (5).
- e) Promotion of participatory and inclusive approaches through awareness-raising with networks and civil society organizations that represent groups in situations of vulnerability. A course was organized with the Economic Commission for Latin America and the Caribbean on the human rights of older persons.
- f) Communication campaigns and events to promote progress in the consideration of human rights and health equity; economic, social, and cultural rights; the rights of children and adolescents; and restrictions on rights during the COVID-19 pandemic. Members of the Committee on Economic, Social and Cultural Rights, the Committee on the Rights of the Child, and the Human Rights Committee participated.
- g) Promotion of training and materials:
 - i. “Human Rights and Health” series on ethnicity, mental health, persons with disabilities, migration, older persons, tobacco, environment and climate change, and healthy eating (6).
 - ii. Self-study course for the PAHO Virtual Campus on Public Health, “A Human Rights Approach to Health,” to strengthen knowledge and the application of international human rights instruments related to health (7).
 - iii. Information platform “Migration and Health in the Americas,” with a focus on human rights: virtual consultation system that maps political, legal, and regulatory frameworks, and relevant judicial decisions in Latin American countries (8).
 - iv. Report on human rights standards and challenges related to access to health and vaccination for migrant populations in the context of COVID-19: includes the identification, analysis, and systematization of regulations, policies, programs, and national plans for migrant health and services for migrants, as well as the barriers they face.

Lessons Learned

5. The COVID-19 pandemic increased both needs and requests for technical cooperation on human rights. When preparing for new challenges and future health crises and emergencies, it is essential to strengthen intersectoral coordination efforts to ensure effective and timely responses by the Bureau in the Region. Offering online content has proven to be a good practice for greater dissemination of and access to information on health and human rights.

Action Needed to Improve the Situation

6. Many Member States have continued to incorporate international human rights instruments into their health-related policies, legislation, and practices. In addition to continuing to support the Bureau's role with regard to international human rights bodies and mechanisms, and its technical cooperation in this area, the following measures are proposed for the consideration of Member States:

- a) Ensure that health actions, strategies, plans, programs, and regulations are aligned with international human rights standards, in particular those that seek resilience and adaptation to the effects of climate change, with special attention to populations in situations of vulnerability, to living conditions in cities and human settlements, and to urban and land use planning policies.
- b) Share information, successful experiences, and good practices among Member States for the protection of human rights in decision-making and the implementation of public health policies, particularly with respect to populations in situations of vulnerability.
- c) Link national human rights mechanisms to the legislative and judicial branches of Member States so that decision-making on issues related to health and its determinants maintains a human rights perspective. There should be collaboration in the formulation and adaptation of regulatory frameworks and in the strengthening of access to justice on health-related rights, with emphasis on preventive actions and alternative dispute resolution mechanisms.
- d) Include or strengthen a human rights perspective in rapid response mechanisms, early warnings, and inter-institutional coordination for the prevention and management of emergencies, health crises, and natural disasters, including in the implementation of urgent measures, actions, and protection plans, with emphasis on populations in situations of vulnerability.
- e) Improve universal health coverage and access from a human rights perspective, through new technologies and nature-based solutions. Within the framework of innovation, explore the relationship between health, its social determinants, and the right of access to information, protection of personal data, and digital rights.
- f) Strengthen social participation and consultation mechanisms, as well as the capacities of policymakers and service providers, from a human rights perspective, in decision-making and implementation of health policies aimed at populations in situations of vulnerability, in line with the Sustainable Health Agenda for the Americas 2018–2030 (9).

Action by the Executive Committee

7. The Executive Committee is invited to take note of this report and provide any comments it deems pertinent.

References

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